

# ***Division of Behavioral Health Services***

## ***Bureau of Compliance***

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**TO: RBHA and TRBHA CEOs, Medical Directors, and Clinical Leadership**

**FROM: Eddy Broadway  
Deputy Director**

**Dan Wendt  
Division Chief, Bureau of Compliance**

**SUBJECT: POLICY CLARIFICATION: MEDICARE PART D IMPLEMENTATION**

**DATE: February 1, 2006**

The purpose of this Policy Clarification is to clarify that the Department intends for Tribal or Regional Behavioral Health Authorities to continue to use state funds to pay for behavioral health medications that cannot be obtained through Medicare Part D plans and to pay the cost sharing requirements under Medicare Part D for dual eligibles and non-Title XIX Medicare eligible persons determined to have a serious mental illness. At this time, the Department has not identified an end date to these policy decisions. This Policy Clarification also provides notice of a decision regarding transporting dual eligibles and non-Title XIX eligible persons determined to have a serious mental illness to Medicare covered behavioral health services.

### **Transition**

The transition to Medicare Part D prescription drug coverage, which began on January 1, 2006, has resulted in a significant number of eligible members being unable to access needed behavioral health medications. There have been numerous issues affecting the ability of Medicare eligible persons to obtain prescription drugs through Medicare Part D. The Department is very appreciative of the T/RBHAs ongoing efforts to ensure that behavioral health recipients are able to access the needed behavioral health medications.

Unfortunately, the transition is not complete and problems with the availability of enrollment data may take weeks to rectify. Over the next month, some behavioral health recipients will attempt to get prescriptions filled through Part D plans for the first time. The T/RBHAs must continue to provide prescription drug coverage with state funds when necessary.

### **Ensuring medication coverage for persons determined to have a serious mental illness**

The Department would like to clarify that persons determined to have a serious mental illness, both dual eligibles and Non-Title XIX Medicare eligible persons, must maintain access to needed behavioral health medications as required by 9 AAC 21. **Therefore, if a person determined to have a serious mental illness is denied coverage of or cannot access a behavioral health medication through his/her assigned Medicare Part D plan for any reason, the T/RBHA must ensure the provision of the behavioral health medication(s).** In these cases, state-only funds will be available to cover the costs of the medication.

### **Medicare Part D cost sharing for persons determined to have a serious mental illness and dual eligibles**

The Department's previous decisions regarding the use of state funds to pay the cost sharing of Medicare Part D for dual eligibles and non-Title XIX Medicare eligible persons determined to have a serious mental illness remain in effect. This includes payment of applicable premiums, co-insurance, co-payments and deductibles.

### **Transportation**

Transportation is a Title XIX reimbursable covered service for Title XIX eligible behavioral health recipients. With the implementation of Medicare Part D, more recipients will be accessing behavioral health services through Medicare Advantage plans, which are Medicare managed care plans that provide Medicare Part A, Part B and Part D benefits. Some of the Medicare Advantage plans are contracting with the Regional Behavioral Health Authorities to provide covered behavioral health services, but this is not the case with every plan. Therefore, behavioral health recipients may be accessing Medicare covered behavioral health services through providers outside of the T/RBHAs' networks. The Arizona Health Care Cost Containment System Administration has determined that Title XIX funding will be available to provide transportation for Title XIX eligible behavioral health recipients for purposes of accessing a Medicare covered behavioral health service. Alternatively, the Department intends for the T/RBHAs to use state funds for non-Title XIX Medicare eligible persons determined to have a serious mental illness who need transportation to a Medicare covered behavioral health service. Transportation under these circumstances for non-Title XIX Medicare eligible, non-seriously mentally ill persons is based on available funding, as determined by the T/RBHA.